Major Donor and Independent Expenditure Committee Type or print in ink. Date Stamp CALIFORNIA **Campaign Statement FORM** (Government Code Sections 84200-84216.5) Statement covers period Date of election if applicable: 1/2 ☑ Amendment (Month, Day, Year) For Official Use Only 07/01/2009 from 12/31/2009 SEE INSTRUCTIONS ON REVERSE through 3. Summary 1. Name and Address Of Filer NAME OF FILER (Amounts may be rounded to whole dollars.) (Include name(s) of all affiliated entities whose contributions are included in this statement.) 1. Expenditures and contributions California State Parks Foundation (including loans) of \$100 or more 106919.58 made this period. (Part 5.) MAILING ADDRESS (NO. AND STREET) 2. Unitemized expenditures and contributions (including loans) under CITY STATE ZIP CODE 0.00 \$100 made this period..... \$ -San Francisco 94133 3. Total expenditures and contributions AREA CODE/DAYTIME PHONE RESPONSIBLE OFFICER 106919.58 (If filer is other than an individual) made this period. (Add Lines 1 + 2.)SUBTOTAL \$ -Elizabeth Goldstein 4. Total expenditures and contributions made from prior statement. (Enter 2. Nature and Interests of Filer (Complete each applicable section.) amount from Line 5 of last statement A FILER THAT IS AN INDIVIDUAL MUST LIST THE NAME, ADDRESS, AND BUSINESS INTERESTS OF EMPLOYER OR, IF SELF-EMPLOYED, THE NAME, ADDRESS, AND NATURE OF THE BUSINESS filed. If this is the first statement for 100000.00 the calendar year, enter zero.)\$ NAME OF EMPLOYER/BUSINESS **BUSINESS INTERESTS** 5. Total expenditures and contributions (including loans) made since ADDRESS OF EMPLOYER/BUSINESS January 1 of the current calendar year. 206919.58 A FILER THAT IS A BUSINESS ENTITY MUST DESCRIBE THE BUSINESS ACTIVITY IN WHICH IT IS 4. Verification **ENGAGED** I have used all reasonable diligence in preparing this statement. I have reviewed the statement and to the best of my knowledge the information contained herein is true and complete. I certify under penalty of perjury under A FILER THAT IS AN ASSOCIATION MUST PROVIDE A SPECIFIC DESCRIPTION OF ITS INTERESTS the laws of the State of California that the foregoing is true and correct. By Elizabeth Goldstein 02/23/2010 Executed on _ A FILER THAT IS NOT AN INDIVIDUAL, BUSINESS ENTITY, OR ASSOCIATION MUST DESCRIBE THE SIGNATURE OF INDIVIDUAL DONOR OR COMMON ECONOMIC INTEREST OF THE GROUP OR ENTITY DATE RESPONSIBLE OFFICER IF OTHER THAN AN INDIVIDUAL Non-Profit Organization

Major Donor and Independent Expenditure Committee Campaign Statement

Type or print in ink.
Amounts may be rounded to whole dollars.

INDEPENDENT EXPENDITURE COMMITTEE AND
MAJOR DONOR COMMITTEE STATEMENT

Statement covers period		CALIFORNIA	161	
from	07/01/2009	FORM	461	
through	12/31/2009	2/2		
unougn				

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

California State Parks Foundation

5. Contributions (Including Loans, Forgiveness of Loans, and Loan Guarantees) and Expenditures Made

(If more space is needed, use additional copies of this page for continuation sheets.)

DATE	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	TYPE OF PAYMENT	DESCRIPTION OF PAYMENT (IF OTHER THAN MONETARY CONTRIBUTION OR LOAN)	CANDIDATE AND OFFICE, MEASURE AND JURISDICTION, OR COMMITTEE	AMOUNT THIS PERIOD	CUMULATIVE AMOUNT RELATIVE TO THIS CANDIDATE, MEASURE, OR COMMITTEE
10/22/2009	Conservation Action Fund	Monetary Contribution			100000.00	Calendar Year
	Sacramento CA 95814 ID: 1272719 Reference No:	Loan Non-Monetary Contribution Independent Expenditure		NO: ☐ Support ☐ Oppose		\$Other
12/01/2009	Californians for State Parks & Wildlife Conservat Sacramento CA 95814 ID: 1322009 Reference No:	Monetary Contribution Loan Non-Monetary Contribution	Staff Services (12/1/09 - 12/31 - /09)	Provide a revenue source for California state parks and natu - Raffestion purpose - s	6919.58	Calendar Year \$ 6919.58 Other
	Neierence No.	Independent Expenditure		X Support ☐ Oppose		\$

SUBTOTAL \$ 106919.58

FPPC From 461 (8/99)

For Technical Assistance: 916/322-5660